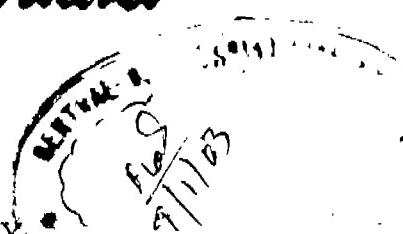


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इस भाग में भिन्न पृष्ठ संख्या दी जाती है जिससे कि यह अलग संकलन के रूप में रखा जा सके।
Separate paging is given to this Part in order that it may be filed as a separate compilation.

RAJYA SABHA

The following Bill was introduced in the Rajya Sabha on the 24th July, 2002:—

BILL NO. LIX OF 2002

A Bill further to amend the Indian Medicine Central Council Act, 1970.

BE IT ENACTED BY PARLIAMENT IN THE FIFTY-THIRD YEAR OF THE REPUBLIC OF INDIA AS FOLLOWS:—

1. (1) This Act may be called the Indian Medicine Central Council (Amendment) Act, 2002. Short title and commencement.

(2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

2. After Chapter II of the Indian Medicine Central Council Act, 1970 (hereinafter referred to as the principal Act), the following Chapter shall be inserted, namely:— Insertion of new Chapter II A.

‘CHAPTER II A

PERMISSION FOR NEW MEDICAL INSTITUTION, COURSE, ETC.

13A. (1) Notwithstanding anything contained in this Act or any other law for the time being in force,— Permission for establishment of new medical institution, new course of study, etc.

(a) no person shall establish a medical institution; or

(b) no medical institution shall—

(i) open a new or higher course of study or training, including a post-graduate course of study or training, which would enable students

of such course or training to qualify himself for the award of any recognised medical qualification; or

(ii) increase its admission capacity in any course of study or training including a post-graduate course of study or training,

except with the previous permission of the Central Government obtained in accordance with the provisions of this section.

Explanation 1.—For the purposes of this section, “person” includes any University or a trust, but does not include the Central Government.

Explanation 2.—For the purposes of this section, “admission capacity”, in relation to any course of study or training, including post-graduate course of study or training, in a medical institution, means the maximum number of students as may be fixed by the Central Council from time to time for being admitted to such course or training.

(2) Every person or medical institution shall, for the purpose of obtaining permission under sub-section (1), submit to the Central Government a scheme in accordance with the provisions of sub-section (3) and the Central Government shall refer the scheme to the Central Council for its recommendations.

(3) The scheme referred to in sub-section (2), shall be in such form and contain such particulars and be preferred in such manner and accompanied with such fees, as may be prescribed.

(4) On receipt of a scheme from the Central Government under sub-section (2), the Central Council may obtain such other particulars as may be considered necessary by it from the person or medical institution concerned, and thereafter, it may,—

(a) if the scheme is defective and does not contain necessary particulars, give a reasonable opportunity to the person or medical institution concerned for making a written representation and it shall be open to such person or medical institution to rectify the defects, if any, specified by the Central Council;

(b) consider the scheme, having regard to the factors referred to in sub-section (8) and submit it to the Central Government together with its recommendations thereon within a period not exceeding six months from the date of receipt of the reference from the Central Government.

(5) The Central Government may, after considering the scheme and recommendation of the Central Council under sub-section (4) and after obtaining, where necessary, such other particulars as may be considered necessary by it from the person or institution concerned and having regard to the factors referred to in sub-section (8), either approve the scheme with such conditions, if any, as it may consider necessary or disapprove the scheme and any such approval shall constitute as a permission under sub-section (1):

Provided that no scheme shall be disapproved by the Central Government except after giving the person or medical institution concerned a reasonable opportunity of being heard :

Provided further that nothing in this sub-section shall prevent any person or medical institution whose scheme has not been approved by the Central Government to submit a fresh scheme and the provision of this section shall apply to such scheme, as if such scheme had been submitted for the first time under sub-section (2).

(6) Where, within a period of one year from the date of submission of the scheme to the Central Government under sub-section (2), no order is communicated by the Central Government to the person or medical institution submitting the scheme, such scheme shall be deemed to have been approved by the Central Government in the

form in which it was submitted, and, accordingly, the permission of the Central Government required under sub-section (1) shall also be deemed to have been granted.

(7) In computing the time-limit specified in sub-section (6), the time taken by the person or medical institution concerned submitting the scheme, in furnishing any particulars called for by the Central Council, or by the Central Government shall be excluded.

(8) The Central Council while making its recommendations under clause (b) of sub-section (4) and the Central Government while passing an order, either approving or disapproving the scheme under sub-section (5), shall have due regard to the following factors, namely:—

(a) whether the proposed medical institution or the existing medical institution seeking to open a new or higher course of study or training, would be in a position to offer the minimum standards of medical education as prescribed by the Central Council under section 22;

(b) whether the person seeking to establish a medical institution or the existing medical institution seeking to open a new or higher course of study or training or to increase its admission capacity has adequate financial resources;

(c) whether necessary facilities in respect of staff, equipment, accommodation, training, hospital or other facilities to ensure proper functioning of the medical institution or conducting the new course of study or training or accommodating the increased admission capacity have been provided or would be provided within the time-limit specified in the scheme;

(d) whether adequate hospital facilities, having regard to the number of students likely to attend such medical institution or course of study or training or the increased admission capacity have been provided or would be provided within the time-limit specified in the scheme;

(e) whether any arrangement has been made or programme drawn to impart proper training to students likely to attend such medical institution or the course of study or training by persons having recognised medical qualifications;

(f) the requirement of manpower in the field of practice of Indian medicine in the institution;

(g) any other factors as may be prescribed.

(9) Where the Central Government passes an order either approving or disapproving a scheme under this section, a copy of the order shall be communicated to the person or medical institution concerned.

13B. (1) Where any medical institution is established without the previous permission of the Central Government in accordance with the provisions of section 13A, medical qualification granted to any student of such medical institution shall not be deemed to be a recognised medical qualification for the purposes of this Act.

(2) Where any medical institution opens a new or higher course of study or training including a post-graduate course of study or training without the previous permission of the Central Government in accordance with the provisions of section 13A, medical qualification granted to any student of such institution on the basis of such study or training shall not be deemed to be a recognised medical qualification for the purposes of this Act.

(3) Where any medical institution increases its admission capacity in any course of study or training without the previous permission of the Central Government in accordance with the provisions of section 13A, medical qualification granted to any student of such medical institution on the basis of the increase in its admission capacity

Non-recognition
of medical
qualifications
in certain
cases.

shall not be deemed to be a recognised medical qualification for the purposes of this Act.'.

Amendment of section 36. 3. In section 36 of the principal Act, in sub-section (1), after clause (g), the following clauses shall be inserted, namely:—

"(ga) the form of the scheme, the particulars to be given in such scheme, the manner in which the scheme is to be preferred and the fees payable with the scheme under sub-section (3) of section 13A.

(gb) any other factor under clause (g) of sub-section (8) of section 13A.".

STATEMENT OF OBJECTS AND REASONS

The Indian Medicine Central Council Act, 1970 was enacted for the constitution of Central Council of Indian Medicine so as to maintain a Central Register of Ayurveda, Siddha and Unani practitioners and to regulate education and practice of Indian systems of medicine.

2. Experience in implementing the provisions of the Act has brought to light certain glaring inadequacies due to which the Central Council has been unable to enforce the provisions of the Act in letter and spirit. Presently, there are 196 colleges of Ayurveda, 35 of Unani and 5 of Siddha system of medicine spread over 20 States of the country. Annual admission capacity of these colleges for graduate course of Ayurveda is 7730 and for post-graduate courses 752. As many as 73 Ayurveda colleges were permitted by the Central Council from 1995 to 2001, out of which 45 are located in the States of Maharashtra and Karnataka alone. These two States have more than half of the total number of colleges in the country. There has been enormous proliferation of sub-standard colleges during the last 5-6 years and almost all the new colleges happen to be from the private sector. It has been observed that the behaviour of the Central Council is contrary to its duties and responsibilities and it has not been able to act judiciously to enforce minimum standards of education as is required under the regulations made under the Act.

3. Recently, it has been observed that some State Governments give approvals for the opening of new colleges in Indian Systems of Medicine on their own, without insisting on the provision of basic facilities for teaching and training. It was also observed that even executive members of the Central Council have been included in the college inspection teams despite clear directions from the Ministry for not deputing such members for the purpose because they have to approve or disapprove the colleges on the basis of inspection reports. A disturbing trend has also been noticed that the Central Council has been meticulous in pointing out deficiencies in the Government-run-colleges but has ignored similar deficiencies in private colleges. There are instances when colleges being permitted in the first year were denied permission in subsequent years. Phenomenon of taking partisan decisions to permit one college and to deny permission to another college having similar infrastructure has also been noted. The procedure adopted for increasing and decreasing the seats has also been far from satisfactory. Seats are increased or decreased without proper evaluation. The Central Government is not in a position to take corrective steps as it has neither the power to intervene nor it can give any direction to the Central Council. Thus it has not been possible to ensure objectivity in the functioning of the Central Council. Above all, there is no provision in the Act, which puts an obligation on the colleges to seek approval of the Central Council for starting the courses of study in Indian Systems of Medicine.

4. In these circumstances, the Central Government has considered it advisable in the public interest to bring in necessary amendment to the Act so as to empower the Central Government to regulate opening of new colleges in the Indian Systems of Medicine, introduction of new or higher courses of study and increase in their admission capacity. This would ensure that colleges with minimum standards alone are permitted to start, in addition to ensuring objectivity and uniformity in their functioning.

5. The Bill seeks to achieve the above objects.

SHATRUGHAN SINHA.

MEMORANDUM REGARDING DELEGATED LEGISLATION

Clause 2 of the Bill seeks to insert new section 13A. Sub-section (3) of the said section empowers the Central Government to prescribe by regulation the form and the manner in which a scheme for the permission to establish a new medical institution or introduce a new or higher course of study or training or increase admission capacity is submitted to the Central Government.

2. These matters relate to procedure and administrative detail and it is not practicable to provide for them in the Bill itself. The delegation of legislative power is, therefore, of a normal character.

R. C. TRIPATHI,
Secretary-General.